

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Roger Dale Smith  
 #37670-080  
 FCI Ashland  
 P. O. Box 6001  
 Ashland, KY 41105-6001

2. Article N  
(Transfer from service label)

7007 0710 0000 8130 3498

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

## A. Signature

**X**

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

D. Is delivery address different from item 1?  
If YES, enter delivery address below:

- ☐ Yes  
☐ No

## 3. Service Type

- ☐ Certified Mail  
☐ Registered  
☐ Insured Mail  
☐ Express Mail  
☐ Return Receipt for Merchandise  
☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

- ☐ Yes

20-542-#12  
 7007